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CONFIRMATION NO. 5162

Bib Data Sheet

SERIAL NUMBER 10/782,456	FILING OR 371(c) DATE 02/19/2004 RULE	CLASS 424	GROUP ART UNIT 1644	ATTORNEY DOCKET NO. CFBF-P02-015
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/860,618 05/17/2001  
 which claims benefit of 60/205,734 05/19/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/14/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	14	30	9
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

21127

**TITLE**

METHODS FOR INDUCING HEMOSTASIS AND TREATING ASSOCIATED DISORDERS

FILING FEE RECEIVED 1958	<p>FEES: Authority has been given in Paper        No. _____ to charge/credit DEPOSIT ACCOUNT        No. _____ for following:</p> <div style="border-left: 1px solid black; padding-left: 10px;"> <input type="checkbox"/> All Fees  <input type="checkbox"/> 1.16 Fees ( Filing )  <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )  <input type="checkbox"/> 1.18 Fees ( Issue )  <input type="checkbox"/> Other _____  <input type="checkbox"/> Credit         </div>
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